

# Donor Registration Form

Nevada: Pursuant to NRS 451.500et seq.

The individual named below consents to be listed in the Donor Registry for the State of Nevada. This is an authorization for organ & tissue donation to be made upon their death.

Driver's License Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Full Name: \_\_\_\_\_

Current Address: \_\_\_\_\_

Donor Comments: Use all my organs: Yes \_\_\_\_\_ No \_\_\_\_\_ Use only the following  
organs/tissues \_\_\_\_\_  
Use all my tissues Yes \_\_\_\_\_ No \_\_\_\_\_

Gender (required): \_\_\_\_\_

Race (optional): \_\_\_\_\_  
(Please print)

Donor Signature: \_\_\_\_\_ Date \_\_\_\_\_

Under the Nevada Revised Statute, an anatomical gift made by a donor and not revoked by the donor before death is irrevocable and does not require consent or concurrence of any person after the donor's death. The law also authorizes any examination necessary to assure the medical acceptability of the anatomical gift.

In order to comply with the wishes of this individual, organ, tissue, and eye recovery agency representatives are authorized to examine or remove copies of medical records, obtain blood and tissue samples to test for hepatitis, HIV, syphilis, and conduct any other examination to determine the medical suitability of the anatomical gift.

A different location may be needed to carry out the recovery of donated tissues. In that case, the body may be transferred to an alternative surgical facility for the recovery of tissues.

## Information Contacts:

Nevada Organ and Tissue Donor Task Force  
775-684-1293

California Transplant Donor Network  
888-570-9400

Sierra Eye Tissue Donor Services  
775-323-1566

Second Chance Foundation  
702-369-5876

Intermountain Donor Services  
801-521-1755

## Return Form to:

Nevada Donor Network  
2085 Sahara Ave.  
Las Vegas, NV 89104  
702-796-9600 Phone  
702-796-4225 Fax

-or-

Sierra Eye & Tissue Donor Services  
1130 Ryland Street  
Reno, NV 89502  
(775) 323-1566 Phone  
(775) 323-1596 Fax